

Agent: _____ Contact: _____

Telephone No: _____ Fax No: _____ Date: _____

Client information	
Client Name:	Postcode:
Address:	
Date Established:	Local Licensing Office:
Business Description: <i>(Including details of all activities)</i>	
Details of any contract work:	
Details of number of escorts used and description of their activities other than supervision:	
Claims: <i>(Please provide full details of any incidents within the last three years)</i>	

Premium (All premiums include IPT & a £35.00 document fee). Minibuses are subject to a maximum of 16 seats

Public Liability Limit of Indemnity £5 million

1 vehicle	-	£ 98.00	Commission	-	£ 16.00
2 vehicles	-	£ 119.00	Commission	-	£ 18.00
3 vehicles	-	£ 171.50	Commission	-	£ 18.00

Cover Required		
Inception Date:		
Number of Vehicles:	Total number of drivers:	
Make and Model	Year	Registration Number
Total Premium		

NB: Quotations for more than 3 vehicles, increased levels of cover, Premises and Employers Liability are available on request. Please complete our standard Liability form.